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APPLICANTS

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** CONTINUING DATA ***** *No ce*

** FOREIGN APPLICATIONS ***** *No ce*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 01/28/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Sealithed ce</i> Examiner's Signature Initials	STATE OR COUNTRY FL	SHEETS DRAWING 2	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 3
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ADDRESS
 39207
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TITLE
 Coaxial horn antenna system

FILING FEE RECEIVED 1094	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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